

K042044

AUG 13 2004

SECTION 11

510(k) Summary of Safety and Effectiveness

Sponsor: Siemens Medical Solutions USA, Inc., Ultrasound Division
1230 Shorebird Way
P.O. Box 7393
Mountain View, California 94039-7393

Contact Person: Patrick Lynch
Regulatory Affairs
Telephone: 425-557-1825
Fax: 425-391-9198

Submission Date: July 28, 2004

Device Name: ACUSON CV70™ Cardiovascular System

Common Name: Diagnostic Ultrasound System with Accessories

Classification:

Regulatory Class: II
Review Category: Tier II
Classification Panel: Radiology

21 CFR 892.1550

	<u>FR #</u>	<u>Product Code</u>
Ultrasonic Pulsed Doppler Imaging System	892.1550	90-IYN
Ultrasonic Pulsed Echo Imaging System	892.1560	90-IYO
Diagnostic Ultrasound Transducer	892.1570	90-ITX

Predicate Devices:

- # K032111 (July 18, 2003) cleared as ACUSON CV70™ Cardiovascular System.

Device Description:

The CV70 system is a multi-purpose diagnostic ultrasound system with accessories and proprietary software, and is substantially equivalent to our current product that is already cleared for USA distribution under the following 510(k) Premarket Notification number:

- # # K032111 (July 18, 2003) cleared as ACUSON CV70™ Cardiovascular System.

The CV70 Cardiovascular System has been designed to conform to the following product safety standards:

- UL 60601-1, Safety Requirements for Medical Equipment
- CSA C22.2 No. 601-1, Safety Requirements for Medical Equipment
- AIUM/NEMA UD-2, 1998, Acoustic Output Measurement Standard for Diagnostic Ultrasound
- AIUM/NEMA UD-3, 1998, Standard for Real Time Display of Thermal and Mechanical Acoustic Output Indices on Diagnostic Ultrasound Equipment
- 93/42/EEC Medical Device Directive
- Safety and EMC Requirements for Medical Equipment
- EN 60601-1
 - EN 60601-1-1
 - EN 60601-1-2
- ISO 10993 Biocompatibility
- The system's acoustic output is in accordance with ALARA principle (as low as reasonably achievable)

Intended Use:

The CV70 platform is intended for use in the following applications:

Abdominal, Intraoperative, Small Parts, Transcranial, Cardiac, Transesophageal, Pelvic, Neonatal/Adult Cephalic, Vascular, Musculoskeletal, Superficial Musculoskeletal, and Peripheral Vascular applications, and intended uses as defined in the FDA guidance document.

The system also provides for the measurement of anatomical structures and for analysis packages that provide information that is used for clinical diagnosis purposes.

Technological Comparison to Predicate Device:

The CV70 is substantially equivalent in its technologies and functionality to the CV70 Cardiovascular System that is already cleared under 510(k) premarket notification number K032111.

The CV70 functions in the same manner as other diagnostic ultrasound systems, in that they transmit ultrasonic energy into the body via a transducer. In the body, acoustic impedance of different tissues reflect different amounts of ultrasound energy back to the transducer, where post processing of received echoes is performed to generate two-dimensional on-screen images of anatomic structures and fluid flow within the body. Doppler principles are used to process reflected ultrasound energy to display moving blood as a spectrum, or as color-coded two-dimensional images. The predicate device listed above, allows for specialized measurements of structures and flow, and provide various calculations' functions.



Food and Drug Administration
9200 Corporate Boulevard
Rockville MD 20850

AUG 13 2004

Mr. Patrick Lynch
Regulatory Affairs
Siemens Medical Solutions USA, Inc.
1230 Shorebird Way
P.O. Box 7393
MOUNTAIN VIEW CA 94039-7393

Re: K042044
Trade Name: ACUSON CV70™ Cardiovascular System
Regulation Number: 21 CFR 892.1550
Regulation Name: Ultrasonic pulsed doppler imaging system
Regulation Number: 21 CFR 892.1560
Regulation Name: Ultrasonic pulsed echo imaging system
Regulation Number: 21 CFR 892.1570
Regulation Name: Diagnostic transducer
Regulatory Class: II
Product Code: 90 IYN, IYO, and ITX
Dated: July 28, 2004
Received: July 30, 2004

Dear Mr. Lynch:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and we have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

This determination of substantial equivalence applies to the following transducers intended for use with the ACUSON CV70™ Cardiovascular System, as described in your premarket notification:

Transducer Model Number

C5-2 Convex Array
C6-2 Convex Array
C8-5 Convex Array

5.0C50+ Convex Array
5.0L45 Linear Array
7.5L70 Linear Array

LB5-2 Linear Array
L10-5 Linear Array
VF13-5 Linear Array
VF13-5SP Linear Array
7.5L50I Linear Array
7.5L50Q Linear Array
LAP8-4 Laparoscopic

P4-2 Phased Sector Array
5.0P10 Phased Sector Array
V5Ms Phased Sector Array TEE
CW2 Continuous Wave Doppler
CW5 Continuous Wave Doppler
P9-4 Phased Sector Array

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register. Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

This determination of substantial equivalence is granted on the condition that prior to shipping the first device, you submit a postclearance special report. This report should contain complete information, including acoustic output measurements based on production line devices, requested in Appendix G, (enclosed) of the Center's September 30, 1997 "Information for Manufacturers Seeking Marketing Clearance of Diagnostic Ultrasound Systems and Transducers." If the special report is incomplete or contains unacceptable values (e.g., acoustic output greater than approved levels), then the 510(k) clearance may not apply to the production units which as a result may be considered adulterated or misbranded.

The special report should reference the manufacturer's 510(k) number. It should be clearly and prominently marked "ADD-TO-FILE" and should be submitted in duplicate to:

Food and Drug Administration
Center for Devices and Radiological Health
Document Mail Center (HFZ-401)
9200 Corporate Boulevard
Rockville, Maryland 20850

This letter will allow you to begin marketing your device as described in your premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus permits your device to proceed to market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Office of Compliance at (301) 594-4591. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-

4639. Also, please note the regulation entitled, “Misbranding by reference to premarket notification” (21 CFR Part 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or at (301) 443-6597 or at its Internet address “<http://www.fda.gov/cdrh/dsmamain.html>”.

If you have any questions regarding the content of this letter, please contact Rodrigo C. Perez at (301) 594-1212.

Sincerely yours,



Nancy C. Brogdon
Director, Division of Reproductive,
Abdominal and Radiological Devices
Office of Device Evaluation
Center for Devices and Radiological Health

Enclosures

Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

Device Name: **ACUSON CV70 Cardiovascular System**
 Intended Use: Diagnostic imaging or fluid flow analysis of the human body as follows:

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal		P	P	P	P	P	P		BMDC	Note 2,3,4,5
Abdominal		P	P	P	P	P	P		BMDC	Note 2,3,4,5
Intraoperative (Note 6)		P	P	P		P	P		BMDC	Note 3
Intraoperative Neurological		P	P	P		P	P		BMDC	Note 3
Pediatric		P	P	P	P	P	P		BMDC	Note 2,3,4,5
Small Organ (Note 1)		P	P	P	P	P	P		BMDC	Note 2,3,4,5
Neonatal Cephalic		P	P	P	P	P	P		BMDC	Note 2,3,4,5
Adult Cephalic		P	P	P	P	P	P		BMDC	Note 2,3
Cardiac		P	P	P	P	P	P		BMDC	Note 2,3,4,5,7
Transesophageal		P	P	P	P	P	P		BMDC	Note 2,3
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel		P	P	P	P	P	P		BMDC	Note 2,3,4,5
Laparoscopic		P	P	P		P	P		BMDC	Note 3
Musculo-skeletal Conventional		P	P	P	P	P	P		BMDC	Note 2,3,4,5
Musculo-skeletal Superficial		P	P	P	P	P	P		BMDC	Note 2,3,4,5
Other (specify)										

N = new indication; P = previously cleared by FDA; E = added under Appendix E

- Note 1 For example: breast, testes, thyroid, penis, prostate, etc.
- Note 2 Ensemble tissue harmonic imaging
- Note 3 3D imaging
- Note 4 B&W SieScape panoramic imaging
- Note 5 Power SieScape panoramic imaging
- Note 6 For example: abdominal, vascular
- Note 7 Contrast agent imaging

(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE IF NEEDED)
 Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use (Per 21 CFR 801.109)

Nancy C. Brogan
 (Division Sign-Off)
 Division of Reproductive, Abdominal,
 and Radiological Devices
 510(k) Number K042044

Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

Device Name: **C5-2 Convex Array Transducer for use with:
 ACUSON CV70 Cardiovascular System**

Intended Use: **Diagnostic imaging or fluid flow analysis of the human body as follows:**

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal		P	P	P		P	P		BMDC	Note 2,3,4,5
Abdominal		P	P	P		P	P		BMDC	Note 2,3,4,5
Intraoperative Abdominal										
Intraoperative Neurological										
Pediatric		P	P	P		P	P		BMDC	Note 2,3,4,5
Small Organ										
Neonatal Cephalic										
Adult Cephalic										
Cardiac										
Trans-esophageal										
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel		P	P	P		P	P		BMDC	Note 2,3,4,5
Laparoscopic										
Musculo-skeletal Conventional										
Musculo-skeletal Superficial										
Other (Specify)										

N = new indication; P = previously cleared by FDA; E = added under Appendix E

Note 2 Ensemble tissue harmonic imaging

Note 3 3D imaging

Note 4 B&W SieScape panoramic imaging

Note 5 Power SieScape panoramic imaging

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 Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use (Per 21 CFR 801.109)

Nancy Brogdon

 (Division Sign-Off)
 Division of Reproductive, Abdominal,
 and Radiological Devices
 510(k) Number K042044

Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

Device Name: **C6-2 Convex Array Transducer for use with:**

ACUSON CV70 Cardiovascular System

Intended Use: **Ultrasound imaging or fluid flow analysis of the human body as follows:**

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal		P	P	P		P	P		BMDC	Note 2,3,4,5
Abdominal		P	P	P		P	P		BMDC	Note 2,3,4,5
Intraoperative Abdominal										
Intraoperative Neurological										
Pediatric		P	P	P		P	P		BMDC	Note 2,3,4,5
Small Organ										
Neonatal Cephalic										
Adult Cephalic										
Cardiac										
Trans-esophageal										
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel		P	P	P		P	P		BMDC	Note 2,3,4,5
Laparoscopic										
Musculo-skeletal Conventional										
Musculo-skeletal Superficial										
Other (specify)										

N = new indication; P = previously cleared by FDA; E = added under Appendix E

- Note 2 Ensemble tissue harmonic imaging
- Note 3 3D imaging
- Note 4 B&W SieScape panoramic imaging
- Note 5 Power SieScape panoramic imaging

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 Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use (Per 21 CFR 801.109)

Nancy C Brogdon

 (Division Sign-Off)
 Division of Reproductive, Abdominal,
 and Radiological Devices
 510(k) Number K042044

Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

Device Name: **C8-5 Convex Array Transducer for use with:
 ACUSON CV70 Cardiovascular System**

Intended Use: **Diagnostic imaging or fluid flow analysis of the human body as follows:**

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal										
Abdominal		P	P	P		P	P		BMDC	Note 2,3,4,5
Intraoperative Abdominal										
Intraoperative Neurological										
Pediatric		P	P	P		P	P		BMDC	Note 2,3,4,5
Small Organ (Note 1)		P	P	P		P	P		BMDC	Note 2,3,4,5
Neonatal Cephalic		P	P	P		P	P		BMDC	Note 2,3,4,5
Adult Cephalic										
Cardiac		E	E	E		E	E		BMDC	Note 2,3,4,5
Transesophageal										
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel										
Laparoscopic										
Musculo-skeletal Conventional		P	P	P		P	P		BMDC	Note 2,3,4,5
Musculo-skeletal Superficial		E	E	E		E	E		BMDC	Note 2,3,4,5
Other (specify)										

N = new indication; P = previously cleared by FDA; E = added under Appendix E

- Note 1 For example: breast, testes, thyroid, penis, prostate, etc.
- Note 2 Ensemble tissue harmonic imaging
- Note 3 3D imaging
- Note 4 B&W SieScape panoramic imaging
- Note 5 Power SieScape panoramic imaging

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Prescription Use (Per 21 CFR 801.109)

Nancy C Brozdon
 (Division Sign-Off)
 Division of Reproductive, Abdominal,
 and Radiological Devices
 510(k) Number K042044

Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

Device Name: **5.0C50+ Convex Array Transducer for use with:
 ACUSON CV70 Cardiovascular System**

Intended Use: **Diagnostic imaging or fluid flow analysis of the human body as follows:**

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal		P	P	P	P	P	P		BMDC	Note 2,3,4,5
Abdominal		P	P	P	P	P	P		BMDC	Note 2,3,4,5
Intraoperative Abdominal										
Intraoperative Neurological										
Pediatric		P	P	P	P	P	P		BMDC	Note 2,3,4,5
Small Organ (Note 1)		P	P	P	P	P	P		BMDC	Note 2,3,4,5
Neonatal Cephalic										
Adult Cephalic										
Cardiac										
Transesophageal										
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel		P	P	P	P	P	P		BMDC	Note 2,3,4,5
Laparoscopic										
Musculo-skeletal Conventional		E	E	E	E	E	E		BMDC	Note 2,3,4,5
Musculo-skeletal Superficial		E	E	E	E	E	E		BMDC	Note 2,3,4,5
Other (specify)										

N = new indication; P = previously cleared by FDA; E = added under Appendix E

- Note 1 For example: breast, testes, thyroid, penis, prostate, etc.
- Note 2 Ensemble tissue harmonic imaging
- Note 3 3D imaging
- Note 4 B&W SieScape panoramic imaging
- Note 5 Power SieScape panoramic imaging

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Prescription Use (Per 21 CFR 801.109)

Nancy C Brogdon

 (Division Sign-Off)
 Division of Reproductive, Abdominal,
 and Radiological Devices
 510(k) Number K042044

Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

Device Name: **5.0L45 Linear Array Transducer for use with:
 ACUSON CV70 Cardiovascular System**

Intended Use: **Diagnostic imaging or fluid flow analysis of the human body as follows:**

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal										
Abdominal		P	P	P	P	P	P		BMDC	Note 2,3,4,5
Intraoperative Abdominal										
Intraoperative Neurological										
Pediatric										
Small Organ (Note 1)		P	P	P	P	P	P		BMDC	Note 2,3,4,5
Neonatal Cephalic										
Adult Cephalic										
Cardiac										
Transesophageal										
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel		P	P	P	P	P	P		BMDC	Note 2,3,4,5
Laparoscopic										
Musculo-skeletal Conventional		P	P	P	P	P	P		BMDC	Note 2,3,4,5
Musculo-skeletal Superficial										
Other (specify)										

N = new indication; P = previously cleared by FDA; E = added under Appendix E

- Note 1 For example: breast, testes, thyroid, penis, prostate, etc.
- Note 2 Ensemble tissue harmonic imaging
- Note 3 3D imaging
- Note 4 B&W SieScape panoramic imaging
- Note 5 Power SieScape panoramic imaging

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 Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use (Per 21 CFR 801.109)

Nancy C Brogdon

 (Division Sign-Off)
 Division of Reproductive, Abdominal,
 and Radiological Devices
 510(k) Number K042044

Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

Device Name: **7.5L70 Linear Array Transducer for use with:
 ACUSON CV70 Cardiovascular System**

Intended Use: **Diagnostic imaging or fluid flow analysis of the human body as follows:**

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal										
Abdominal										
Intraoperative Abdominal										
Intraoperative Neurological										
Pediatric		P	P	P		P	P		BMDC	Note 3,4,5
Small Organ (Note 1)		P	P	P		P	P		BMDC	Note 3,4,5
Neonatal Cephalic										
Adult Cephalic										
Cardiac										
Transesophageal										
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel		E	E	E		E	E		BMDC	Note 3,4,5
Laparoscopic										
Musculo-skeletal Conventional		P	P	P		P	P		BMDC	Note 3,4,5
Musculo-skeletal Superficial		P	P	P		P	P		BMDC	Note 3,4,5
Other (specify)										

N = new indication; P = previously cleared by FDA; E = added under Appendix E

Note 1 For example: breast, testes, thyroid, penis, prostate, etc.

Note 3 3D imaging

Note 4 B&W SieScape panoramic imaging

Note 5 Power SieScape panoramic imaging

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Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use (Per 21 CFR 801.109)

Nancy C Brogdon

 (Division Sign-Off)
 Division of Reproductive, Abdominal,
 and Radiological Devices
 510(k) Number K042044

Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

Device Name: **LB5-2 Linear Array Transducer for use with:
 ACUSON CV70 Cardiovascular System**

Intended Use: **Diagnostic imaging or fluid flow analysis of the human body as follows:**

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal		P	P	P		P	P		BMDC	Note 4,5
Abdominal		P	P	P		P	P		BMDC	Note 4,5
Intraoperative Abdominal										
Intraoperative Neurological										
Pediatric										
Small Organ										
Neonatal Cephalic										
Adult Cephalic										
Cardiac										
Transesophageal										
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel										
Laparoscopic										
Musculo-skeletal Conventional										
Musculo-skeletal Superficial										
Other (specify)										

N = new indication; P = previously cleared by FDA; E = added under Appendix E

Note 4 B&W SieScape panoramic imaging
 Note 5 Power SieScape panoramic imaging

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 Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use (Per 21 CFR 801.109)

Nancy C. Brogan
 (Division Sign-Off)
 Division of Reproductive, Abdominal,
 and Radiological Devices
 510(k) Number K042044

Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

Device Name: **L10-5 Linear Array Transducer for use with:
 ACUSON CV70 Cardiovascular System**

Intended Use: **Ultrasound imaging or fluid flow analysis of the human body as follows:**

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal										
Abdominal		P	P	P		P	P		BMDC	Note 2,3,4,5
Intraoperative Abdominal										
Intraoperative Neurological										
Pediatric		P	P	P		P	P		BMDC	Note 2,3,4,5
Small Organ (Note 1)		P	P	P		P	P		BMDC	Note 2,3,4,5
Neonatal Cephalic										
Adult Cephalic										
Cardiac										
Trans-esophageal										
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel		P	P	P		P	P		BMDC	Note 2,3,4,5
Laparoscopic										
Musculo-skeletal Conventional		P	P	P		P	P		BMDC	Note 2,3,4,5
Musculo-skeletal Superficial		P	P	P		P	P		BMDC	Note 2,3,4,5
Other (specify)										

N = new indication; P = previously cleared by FDA; E = added under Appendix E

- Note 1 For example: breast, testes, thyroid, penis, prostate, etc.
- Note 2 Ensemble tissue harmonic imaging
- Note 3 3D imaging
- Note 4 B&W SieScape panoramic imaging
- Note 5 Power SieScape panoramic imaging

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 Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use (Per 21 CFR 801.109)

Nancy Brozdon
 (Division Sign-Off)
 Division of Reproductive, Abdominal,
 and Radiological Devices
 510(k) Number K042044

Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

Device Name: **VF13-5 Linear Array Transducer for use with:
 ACUSON CV70 Cardiovascular System**

Intended Use: **Diagnostic imaging or fluid flow analysis of the human body as follows:**

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal										
Abdominal										
Intraoperative Abdominal										
Intraoperative Neurological										
Pediatric		P	P	P	P	P	P		BMDC	Note 3,4,5
Small Organ (Note 1)		P	P	P	P	P	P		BMDC	Note 3,4,5
Neonatal Cephalic										
Adult Cephalic										
Cardiac										
Transesophageal										
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel		P	P	P	P	P	P		BMDC	Note 3,4,5
Laparoscopic										
Musculo-skeletal Conventional		P	P	P	P	P	P		BMDC	Note 3,4,5
Musculo-skeletal Superficial		P	P	P	P	P	P		BMDC	Note 3,4,5
Other (specify)										

N = new indication; P = previously cleared by FDA; E = added under Appendix E

Note 1 For example: breast, testes, thyroid, penis, prostate, etc.

Note 3 3D imaging

Note 4 B&W SieScape panoramic imaging

Note 5 Power SieScape panoramic imaging

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Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use (Per 21 CFR 801.109)

Nancy Brogdon
 (Division Sign-Off)
 Division of Reproductive, Abdominal,
 and Radiological Devices
 510(k) Number K042044

Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

Device Name: **VF13-5SP Linear Array Transducer for use with:
 ACUSON CV70 Cardiovascular System**

Intended Use: **Diagnostic imaging or fluid flow analysis of the human body as follows:**

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal										
Abdominal										
Intraoperative (note 6)		P	P	P		P	P		BMDC	Note 3
Intraoperative Neurological		P	P	P		P	P		BMDC	Note 3
Pediatric		P	P	P		P	P		BMDC	Note 3
Small Organ (Note 1)		P	P	P		P	P		BMDC	Note 3
Neonatal Cephalic										
Adult Cephalic										
Cardiac										
Transesophageal										
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel		P	P	P		P	P		BMDC	Note 3
Laparoscopic										
Musculo-skeletal Conventional		P	P	P		P	P		BMDC	Note 3
Musculo-skeletal Superficial		P	P	P		P	P		BMDC	Note 3
Other (specify)										

N = new indication; P = previously cleared by FDA; E = added under Appendix E

Note 1 For example: breast, testes, thyroid, penis, prostate, etc.

Note 3 3D imaging

Note 6 For example: abdominal, vascular

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 Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use (Per 21 CFR 801.109)

Nancy C Brogdon

 (Division Sign-Off)
 Division of Reproductive, Abdominal,
 and Radiological Devices
 510(k) Number KO42044

Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

Device Name: **7.5L50I Linear Array Transducer for use with:
 ACUSON CV70 Cardiovascular System**

Intended Use: **Diagnostic imaging or fluid flow analysis of the human body as follows:**

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal										
Abdominal		P	P	P		P	P		BMDC	Note 3,4,5
Intraoperative (Note 6)		P	P	P		P	P		BMDC	Note 3,4,5
Intraoperative Neurological										
Pediatric										
Small Organ (Note 1)		P	P	P		P	P		BMDC	Note 3,4,5
Neonatal Cephalic										
Adult Cephalic										
Cardiac										
Transesophageal										
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel		P	P	P		P	P		BMDC	Note 3,4,5
Laparoscopic										
Musculo-skeletal Conventional		P	P	P		P	P		BMDC	Note 3,4,5
Musculo-skeletal Superficial										
Other (specify)										

N = new indication; P = previously cleared by FDA; E = added under Appendix E

- Note 1 For example: breast, testes, thyroid, penis, prostate, etc.
- Note 3 3D imaging
- Note 4 B&W SieScape panoramic imaging
- Note 5 Power SieScape panoramic imaging
- Note 6 For example: abdominal, vascular

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 Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use (Per 21 CFR 801.109)

Nancy Brogdon
 (Division Sign-Off)
 Division of Reproductive, Abdominal,
 and Radiological Devices
 510(k) Number K042044

Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

Device Name: **7.5L50Q Linear Array Transducer for use with:
 ACUSON CV70 Cardiovascular System**

Intended Use: **Diagnostic imaging or fluid flow analysis of the human body as follows:**

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal										
Abdominal		P	P	P		P	P		BMDC	Note 3,4,5
Intraoperative (Note 6)		P	P	P		P	P		BMDC	Note 3,4,5
Intraoperative Neurological										
Pediatric										
Small Organ (Note 1)		P	P	P		P	P		BMDC	Note 3,4,5
Neonatal Cephalic										
Adult Cephalic										
Cardiac										
Transesophageal										
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel		P	P	P		P	P		BMDC	Note 3,4,5
Laparoscopic										
Musculo-skeletal Conventional		P	P	P		P	P		BMDC	Note 3,4,5
Musculo-skeletal Superficial										
Other (specify)										

N = new indication; P = previously cleared by FDA; E = added under Appendix E

- Note 1 For example: breast, testes, thyroid, penis, prostate, etc.
- Note 3 3D imaging
- Note 4 B&W SieScape panoramic imaging
- Note 5 Power SieScape panoramic imaging
- Note 6 For example: abdominal, vascular

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Prescription Use (Per 21 CFR 801.109)

Nancy Brogdon
 (Division Sign-Off)
 Division of Reproductive, Abdominal,
 and Psychological Devices
 510(k) Number K042044

Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

Device Name: **LAP8-4 Laparoscopic Transducer for use with:
 ACUSON CV70 Cardiovascular System**

Intended Use: **Diagnostic imaging or fluid flow analysis of the human body as follows:**

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal										
Abdominal										
Intraoperative (Note 6)		P	P	P		P	P		BMDC	Note 3,4,5
Intraoperative Neurological										
Pediatric										
Small Organ										
Neonatal Cephalic										
Adult Cephalic										
Cardiac										
Transesophageal										
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel										
Laparoscopic		P	P	P		P	P		BMDC	Note 3,4,5
Musculo-skeletal Conventional										
Musculo-skeletal Superficial										
Other (specify)										

N = new indication; P = previously cleared by FDA; E = added under Appendix E

Note 3 3D imaging

Note 4 B&W SieScape panoramic imaging

Note 5 Power SieScape panoramic imaging

Note 6 For example: abdominal, vascular

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Prescription Use (Per 21 CFR 801.109)

Nancy C Brogdon
 (Division Sign-Off)
 Division of Reproductive, Abdominal,
 and Radiological Devices
 510(k) Number K042044

Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

Device Name: **P4-2 Phased Sector Array Transducer for use with:
 ACUSON CV70 Cardiovascular System**

Intended Use: **Diagnostic imaging or fluid flow analysis of the human body as follows:**

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal										
Abdominal		P	P	P	P	P	P		BMDC	Note 2,3
Intraoperative Abdominal										
Intraoperative Neurological										
Pediatric										
Small Organ										
Neonatal Cephalic										
Adult Cephalic		P	P	P	P	P	P		BMDC	Note 2,3
Cardiac		P	P	P	P	P	P		BMDC	Note 2,3,7
Transesophageal										
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel										
Laparoscopic										
Musculo-skeletal Conventional										
Musculo-skeletal Superficial										
Other (specify)										

N = new indication; P = previously cleared by FDA; E = added under Appendix E

Note 2 Ensemble tissue harmonic imaging

Note 3 3D imaging

Note 7 Contrast agent imaging

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Prescription Use (Per 21 CFR 801.109)

Nancy Brogdon

 (Division Sign-Off)
 Division of Reproductive, Abdominal,
 and Radiological Devices
 510(k) Number K042044

Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

Device Name: **5.0P10 Phased Sector Array Transducer for use with:
 ACUSON CV70 Cardiovascular System**

Intended Use: **Diagnostic imaging or fluid flow analysis of the human body as follows:**

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal		P	P	P	P	P	P		BMDC	Note 2
Abdominal		P	P	P	P	P	P		BMDC	Note 2
Intraoperative Abdominal										
Intraoperative Neurological										
Pediatric		P	P	P	P	P	P		BMDC	Note 2
Small Organ										
Neonatal Cephalic		P	P	P	P	P	P		BMDC	Note 2
Adult Cephalic										
Cardiac		P	P	P	P	P	P		BMDC	Note 2,7
Transesophageal										
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel										
Laparoscopic										
Musculo-skeletal Conventional										
Musculo-skeletal Superficial										
Other (specify)										

N = new indication; P = previously cleared by FDA; E = added under Appendix E

Note 2 Ensemble tissue harmonic imaging
 Note 7 Contrast agent imaging

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Prescription Use (Per 21 CFR 801.109)

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 and Radiological Devices
 510(k) Number K042044

Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

Device Name: **V5Ms Phased Sector Array TEE Transducer for use with:
 ACUSON CV70 Cardiovascular System**

Intended Use: **Ultrasound imaging or fluid flow analysis of the human body as follows:**

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal										
Abdominal										
Intraoperative Abdominal										
Intraoperative Neurological										
Pediatric										
Small Organ (Specify)										
Neonatal Cephalic										
Adult Cephalic										
Cardiac										
Trans-esophageal		P	P	P	P	P	P		BMDC	Note 2,3
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel										
Laparoscopic										
Musculo-skeletal Conventional										
Musculo-skeletal Superficial										
Other (specify)										

N = new indication; P = previously cleared by FDA; E = added under Appendix E

Note 2 Ensemble tissue harmonic imaging

Note 3 3D imaging

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Prescription Use (Per 21 CFR 801.109)


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 Division of Reproductive, Abdominal,
 and Radiological Devices
 510(k) Number K042044

Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

Device Name: **CW2 Continuous Wave Doppler Transducer for use with:
 ACUSON CV70 Cardiovascular System**

Intended Use: **Ultrasound imaging or fluid flow analysis of the human body as follows:**

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal										
Abdominal										
Intraoperative Abdominal										
Intraoperative Neurological										
Pediatric										
Small Organ										
Neonatal Cephalic										
Adult Cephalic										
Cardiac					P					
Trans-esophageal										
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel										
Laparoscopic										
Musculo-skeletal Conventional										
Musculo-skeletal Superficial										
Other (specify)										

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Prescription Use (Per 21 CFR 801.109)


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 Division of Reproductive, Abdominal,
 and Radiological Devices
 510(k) Number K042044

Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

Device Name: **CW5 Continuous Wave Doppler Transducer for use with:
 ACUSON CV70 Cardiovascular System**

Intended Use: **Ultrasound imaging or fluid flow analysis of the human body as follows:**

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal										
Abdominal										
Intraoperative Abdominal										
Intraoperative Neurological										
Pediatric										
Small Organ										
Neonatal Cephalic										
Adult Cephalic										
Cardiac										
Trans-esophageal										
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel					P					
Laparoscopic										
Musculo-skeletal Conventional										
Musculo-skeletal Superficial										
Other (specify)										

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 Division of Reproductive, Abdominal,
 and Radiological Devices
 510(k) Number K042044

Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

Device Name: **P9-4 Phased Sector Array Transducer for use with:
 ACUSON CV70 Cardiovascular System**

Intended Use: **Diagnostic imaging or fluid flow analysis of the human body as follows:**

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal		N	N	N	N	N	N		BMDC	Note 2
Abdominal		N	N	N	N	N	N		BMDC	Note 2
Intraoperative Abdominal										
Intraoperative Neurological		N	N	N		N	N		BMDC	Note 2
Pediatric		N	N	N	N	N	N		BMDC	Note 2
Small Organ										
Neonatal Cephalic		N	N	N	N	N	N		BMDC	Note 2
Adult Cephalic										
Cardiac		N	N	N	N	N	N		BMDC	Note 2,7
Transesophageal										
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel		N	N	N	N	N	N		BMDC	Note 2
Laparoscopic										
Musculo-skeletal Conventional										
Musculo-skeletal Superficial										
Other (specify)										

N = new indication; P = previously cleared by FDA; E = added under Appendix E

Note 2 Ensemble tissue harmonic imaging
 Note 7 Contrast agent imaging

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Prescription Use (Per 21 CFR 801.109)


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 Division of Reproductive, Abdominal,
 and Radiological Devices
 510(k) Number 12042044